



TAX CHECKLIST

Here is a helpful checklist of the information that you should provide us to prepare your return.

- Taxpayer's name, social security number, and date of birth
- Spouse's name, social security number, date of birth
- Residence address and telephone number
- Marital status as of December 31st
- Dependent children's name, social security number, and date of birth
- Other dependents' name, social security number, date of birth, relationship to you, number of months lived with you, their income amounts, amount of their support furnished by you
- W-2s
- Other income:
 - Sick pay
 - Annuities
 - Dividends
 - Interest income
 - Pensions
 - Royalties
 - Tips
 - Social Security
 - Unemployment
 - Gambling income
 - Alimony
- Stock sales (provide purchase date, purchase price, sales date, sale proceeds)
- Rental income (also provide expenses such as mortgage interest, real estate taxes, insurance, repairs, maintenance, and commissions or fees paid)
- Business income (also provide expenses and copy of prior year tax return if available: for any assets purchases provide description, date of purchase, cost, business use percentage)
- Do you have a home office? If so, please provide total square footage of your home, square footage of area used for business, rent or mortgage interest paid, real estate taxes, insurance, repairs or maintenance, total utilities paid for the year, original cost of home, and date stated using for business
- Do you have a self-employed pension plan?
- Do you have self-employed health coverage?
- Did you make any contributions to an IRA?
- Do you pay alimony? If so, provide amounts paid as well as name and social security number of person paid
- Child care (provide name of dependent being cared for, amounts paid, and name and social security number/EIN of care provider)
- Education expenses (provide student name and amounts paid for tuition, books, and fees)
- Have you purchased a new house? If so, please provide a copy of your closing settlement statement
- Did you sell your home, real estate, business autos, or other business equipment?
- Homeowners:
 - Mortgage interest
 - Real estate taxes
- Other interest paid (provide to whom paid and their social security number or EIN)
- Charitable contributions
 - Donations such as clothing
- Medical:
 - Insurance premiums
 - Drugs and medicines
 - Travel expenses
 - Out-of-pocket expenses for doctors, nurses, dentists, chiropractors, hospitals, ambulance
 - Glasses and contact lenses
 - Hearing aid
 - Corrective shoes
 - Contact lens insurance
- Taxes:
 - State and city income tax
 - Personal property tax
 - Any other taxes paid
- Casualty losses: (provide date and location of incident, original cost of losses, current fair market value of all losses as of date of loss, and any insurance reimbursement received)
 - Car accident
 - Fire
 - Property damage
 - Storm
 - Theft
 - Other
- Miscellaneous:
 - Employment agency fees
 - Income tax preparation fees
 - Safety deposit box fees
 - Safety equipment
 - Uniforms or uniform laundry and cleaning
 - Union dues
 - Employee expenses from your job for which you are not reimbursed